COMPLETE THIS SECTION ON DELIVERY SENDER: COMPLETE THIS SECTION ■ Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, lohn A STEWAM or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: John Stewart 5454 La Sierra Dr. Dallas, TX 75231 3. Service Type Certified Mail ☐ Express Mail □ Registered ☐ Return Receipt for Merchandise Insured Mail ☐ C.O.D. 4. Restricted Delivery? (Extra Fee) ☐ Yes 2. Article Number 7010 2780 0002 4354 8672 (Transfer from service label) PS Form 3811, February 2004 102595-02-M-1540 **Domestic Return Receipt**

United States Pos	TAL SERVICE		First-Class Mail Postage & Fees USPS Permit No. G-10
RECEISE 14 FEB 2 July	Stephen Capuyan, Er	ction Agency, Region 6 SSF-TE	P+4 in this box •

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